International Journal of Science and Research (IJSR) ISSN: 2319-7064

SJIF (2022): 7.942

A Study to Assess the Prevalence of Hypertension and Risk Factors among Adults Residing in Nij-Sindurighopa Village, Kamrup, Assam

Farhin Islam¹, Subhra Bhowmik²

¹Lecturer, Department of Child Health Nursing Email: *islamfarhin279[at]gmail.com*

²Assistant Professor, Dept. of Mental Health Nursing

Abstract: <u>Background of the study</u>: Hypertension is a major public health problem due to its high prevalence all around the globe. The overall prevalence of hypertension in India is 29.8% and 26% worldwide. <u>The objective of the study</u>: To assess the prevalence of hypertension and find out the risk factors of hypertension among adults residing in Nij-Sindurighopa village, Kamrup, Assam. <u>Material and method</u>: A non-experimental quantitative research approach was adopted with sample of 92 adults above 19 years of age, residing in Nij-Sindurighopa village, Kamrup, Assam using multistage sampling technique. <u>Result</u>: The study concludes that the prevalence of hypertension was 1.47% and majority 58.7% of the participants were under low risk of hypertension. <u>Conclusion</u>: The prevalence and risk factors of hypertension in Nij-Sindurighopa village, Kamrup, Assam was low.

Keywords: Assess, Hypertension, Risk factor, Prevalence, Adults

1. Introduction

Hypertension is a major public health problem due to its high prevalence all around the globe. Hypertension is used to assess the risk factors for various chronic heart disease, stroke and coronary artery disease. Hypertension often accompanies other risk factors for atherosclerosis heart disease, such as dyslipidemia, obesity, diabetes mellitus, metabolic syndrome, and a sedentary lifestyle. Prolong blood pressure elevation eventually damages blood vessels throughout the body, particularly in target organs such as the heart, kidney, brain and eyes. The consequences of prolonged and uncontrolled hypertension can lead to myocardial infarction (MI), heart failure, renal failure, stroke and impaired vision. 1, 2

According to the Joint National Committee7, normal blood pressure is a systolic blood pressure less than 120 mmHg and diastolic blood pressure is less than 80 mmHg. Hypertension is defined as systolic blood pressure level of more than or equal to 140 mmHg and diastolic blood pressure level more than or equal to 90 mmHg. The grey area falling between 120-130 mmHg, systolic blood pressure and 80-89 mmHg, diastolic blood pressure is defined as pre hypertension. 1

Globally an estimated 26% of the world population are hypertensive and the prevalence is expected to increase to 29% by 2025, driven largely by increase in economically developing nations.³ Overall prevalence for hypertension on 2014 in India was 29.8%. A significant difference in hypertension prevalence was noted between rural parts (27.6%) and urban parts (33.8%).⁴ In Assam, the overall prevalence of hypertension on 2003 was 63.63%.⁵

Objectives of the study

 To assess the prevalence of hypertension among adults residing in Nij-Sindurighopa village, Kamrup, Assam. To find out the risk factors of hypertension among adults residing in Nij-Sindurighopa village, Kamrup, Assam.

2. Review of Literature

Section A: review of literature related to prevalence of hypertension.

Hazarika NC, Narain K, Biswas D, Kalita HC, Mahanta J (2003) conducted a study on hypertension in the native rural population of Assam. The researcher has found that the overall prevalence of hypertension was 33.3%.

Section B: review of literature related to risk factors and hypertension among adolescence.

Banerjee S, Deshmukh P (2021) conducted a cross sectional study on hypertension and its determinants among school going adolescents in urban slums of Nagpur city, Maharashtra. The study findings reveal that 10.6% were hypertensive and 12.9% were pre hypertensive.⁷

Section C: review of literature related to prevalence and associated risk factor of hypertension.

Kurjogi M M, Vanti L G, Kaulgud S R (2019) conducted a study on prevalence of hypertension and its associated risk factors in Dharwad population. The study revealed that the prevalence of hypertension was higher in alcohol-intake, tobacco-smoking/ chewing participants and sedentary life style is also one of significant risk factor for hypertension. Overall increased rate of hypertension poses a biggest challenge for health sector in Dharwad district.⁸

3. Research Methodology

Research approach: Quantitative research approach.

Research design: Community based cross sectional research design.

Volume 12 Issue 3, March 2023

www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

Paper ID: MR23314205849 DOI: 10.21275/MR23314205849 638

International Journal of Science and Research (IJSR) ISSN: 2319-7064

ISSN: 2319-7064 SJIF (2022): 7.942

Study setting: Nij Sindurighopa village, Kamrup, Assam.

Demographic variables: Age, gender, religion, educational qualification, occupation, income, chronic illness, medication, stress, family history, exercise, food habit, use of alcohol, knowledge of hypertension.

Research variables: Prevalence of hypertension and risk factors of hypertension.

Target population: Adults above 19 years of age residing in Kamrup, Assam

Accessible population: Adults above 19 years of age residing in Nij Sindurighopa village, Kamrup, Assam.

Sampling technique: Multi stage sampling technique.

Sample and sample size: 92 rural adults.

Selection of the tools:

- 1) Manual blood pressure apparatus and stethoscope
- 2) Socio demographic proforma consisting of 15 items
- 3) Modified WHO stepwise approach to chronic disease risk factors surveillance (STEPS) checklist

4. Data Analysis and Interpretation

Section A: Frequency and percentage distribution of demographic variables

Table 1 (a): Frequency and percentage distribution according to the age, gender, religion, education and occupation. n=92

| 11–92 | | | | | | |
|-------|------------|-------------------------|-----------|---------------|--|--|
| S. No | Variables | Category | Frequency | Percentage | | |
| | | 20.20 | 14 | (%) 15.30% | | |
| 1 | Age | 20-30 years | | | | |
| | | 30-40 years | 30 | 32.60% | | |
| | | 40-50 years | 17 | 18.50% | | |
| | | 50 above | 31 | 33.60% | | |
| 2 | Gender | Male | 35 | 38.04% | | |
| | | Female | 57 | 61.96% | | |
| 3 | Religion | Hinduism | 79 | 85.87% | | |
| | | Islam | 13 | 14.13% | | |
| 4 | Education | No formal education | 14 | 15.22% | | |
| | | Primary school level | 20 | 21.74% | | |
| | | Middle school level | 19 | 20.65% | | |
| | | High school level | 18 | 19.57% | | |
| | | Higher secondary level | 12 | 13.04% | | |
| | | Graduate and above | 9 | 9.78% | | |
| | Occupation | Student | 4 | 4.35% | | |
| | | Unemployed | 8 | 8.70% | | |
| | | Home maker | 44 | 47.87% | | |
| _ | | Farmer | 6 | 6.51% | | |
| 5 | | Industrial worker | 10 | 10.87% | | |
| | | Private business | 17 | 18.48% | | |
| | | Government employee | 3 | 3.26% | | |
| 6 | Income | Upper class | 3 | 3.26% | | |
| | | Upper middle class | 4 | 4.35% | | |
| | | Middle class | 41 | 44.57% | | |
| | | Lower middle class | 23 | 25% | | |
| | | Lower class | 21 | 22.82% | | |
| | | | | | | |

Table 1 (a) shows that majority 32.6% of the participants were 50 years above of age group, 61.96% were female, 85.87% were Hinduism by religion, 21.73% were primary

school level, 47.87 % were home maker and 44.57% were from middle class.

Section B: Frequency and percentage distribution of risk factor of hypertensionand category of hypertension

Table 2 (a): Frequency and percentage distribution of risk factor of hypertension, n=92

| Risk Factor of Hypertension | | | | | | | |
|-----------------------------|---------------------------|-----------|----------------|--|--|--|--|
| Category | Score | Frequency | Percentage (%) | | | | |
| Low | 15.8 (Below16) | 55 | 59.8% | | | | |
| Moderate | 19.8 (16-20) | 35 | 38.5% | | | | |
| Severe | More Than 19.8 (Above 20) | 2 | 2.8% | | | | |

Volume 12 Issue 3, March 2023

www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

Paper ID: MR23314205849 DOI: 10.21275/MR23314205849 639

International Journal of Science and Research (IJSR)

ISSN: 2319-7064 SJIF (2022): 7.942

Table 2 (a) shows that majority 58.7% of the participants were under low risk factor of hypertension followed by 38.5% were under moderate risk factor of hypertension and 2.8% were under severe risk factor of hypertension.

Table 2 (b): Frequency and percentage distribution according to the category of hypertension, n=92

| Catagory of hymontonsion | Range | | | Percentage |
|--------------------------|--------------------------------|---------------------------------|-----------|------------|
| Category of hypertension | Systolic blood pressure (mmHg) | Diastolic blood pressure (mmHg) | Frequency | (%) |
| Optimal | <120 | <80 | 22 | 23.9% |
| Normal | 120-129 | 80-84 | 29 | 31.52% |
| Normal high | 130-139 | 85-89 | 14 | 15.21% |
| Grade 1 light | 140-159 | 90-99 | 8 | 8.70% |
| Grade 2 moderate | 160-179 | 100-109 | 0 | 0% |
| Grade3 severe | ≥180 | ≥110 | 0 | 0% |
| Systolic hypertension | ≥140 | <90 | 0 | 0% |

Table 2 (b) shows that majority 31.52% of the participants was having normal blood pressure, 23.9% were having optimal blood pressure, 15.21% were having normal high blood pressure and 8.70% were having grade 1 light blood pressure. There are no participants who were having grade 2 moderate, grade 3 severe and systolic hypertensions.

Section D: Prevalence of hypertension

Point prevalence of hypertension=

no of all current cases of specified
disease existing at a given point in time

estimated population at the same point in time

$$=\frac{22}{1493}\times100$$

=1.47 %

In the present study, the prevalence of hypertension was found to be 1.47%.

5. Discussion

In the present study, the prevalence of hypertension is 1.47. Present study finding is inconsistent with the study conducted by the Hazarika NC, NarainK, BiswasD, Kalita HC, Mahanta Jon hypertension in the native rural population of Assam where the researcher has found that the overall prevalence of hypertension was 33.3%.⁵

Present study finding which is inconsistent with the study conducted by Singh N, Rahman SJ where the researcher found that overall prevalence among the study subject was 23.5%.44.5% of the total participants was in the pre hypertensive stage.¹¹

6. Conclusion

This study had been conducted to assess the prevalence of hypertension and risk factors among adults residing in Nij Sindurighopa village, Kamrup, Assam. In the present study, it was found that majority 58.7% of the participants were under low category of risk factor of hypertension. Majority 31.52% of the participants were having normal blood pressure and the prevalence of hypertension is 1.47 %. The assumptions of the study were rejected as the prevalence and risk factors of hypertension was low.

7. Limitation

- The study has focused on prevalence and risk factor of hypertension.
- The study was done only in one village in Kamrup, Assam with 92 samples.

8. Recommendation

- A similar study can be done in different setting with large sample size.
- A comparative study can be done between younger adults and older adults.
- A comparative study can be done between male and female.
- A structured teaching programme study can be done on knowledge regarding hypertension.

Acknowledgement

- We owe a deep sense of gratitude to Mrs. Prity Devi, Vice Principal, Nivedita Nursing Institute, Coochbehar, for allowing us to use her "Modified WHO Stepwise approach to chronic disease risk factor surveillance (STEPS) structured checklist" for our research study.
- We are extremely thankful to Mompi Pradhan, DarathiNeog, Doi Basar, HakaniLaloo, Chingam Kobo Bogum, Mousumi Begum, Pakiza Ahmed, Bidisha Brahma, Teli Shanti and Nazir Hassan for their contribution in our research study.

References

- [1] Prevalence and associated risk factors of hypertension: A cross-sectional study in urban Varanasi. Int. J. Hypertens.2017; 1-10
- [2] Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC57339
- [3] Elisa M, Hutchinson L. Textbook of Medical Surgical Nursing.3rd ed.7: 636
- [4] Available from: https://www.who. int/news-room/fact-sheets/detail /hypertension
- [5] Raghupathy A, Nanda KK, Hira P. Hypertension in India: a systematic review and meta-analysis of prevalence, awareness and control of hypertension. J Hypertens. 2014; 32. (6): 1170-1177

Volume 12 Issue 3, March 2023

www.ijsr.net

<u>Licensed Under Creative Commons Attribution CC BY</u>

Paper ID: MR23314205849 DOI: 10.21275/MR23314205849 640

International Journal of Science and Research (IJSR) ISSN: 2319-7064 SJIF (2022): 7.942

- [6] Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC40115
- [7] Hazarika NC, Biswas D, Mahanta J. Hypertension in the elderly population of assam. NLM.2003. Available from: https://pubmed.ncbi.nlm.nih.gov/15266922/
- [8] Hazarika NC, Narain K, Biswas D, Kalita HC, Mahanta J. A study on hypertension in the native rural population of Assam.2003. Available formhttps://pubmed.ncbi.nlm.nih.gov
- [9] Banerjee S, Deshmukh P. A cross section study on hypertension and its determinants among school going adolescents in urban slams of Nagpur city, Maharashtra.2021. Available from https://www.sciencedirect.com/science/article/pii/ S221339 8421001408
- [10] Kurjogi MM, Vanti LG, Kaulgud SR. A study on prevalence of hypertension and its associated risk factors Dharwad population.2019. Available from https://www.ncbi.nlm. nih.gov/tnc/articles/PMC8642654
- [11] Singh N, Rahman SJ. A study on the prevalence and awareness of hypertension among women in the reproductive age group and the factors contributing to it in a rural area of Jorhat district, Assam. IJCMPH.2017; 4: 3473-3478

Authors Profile



Farhin Islam, Lecturer, Dept. of Child Health Nursing, Arya Nursing College, Changsari, Assam. Ph. No-8721842928, Email-islamfarhin279[at]gmail.com



Subhra Bhowmik, Assistant Professor, Dept. of Mental Health Nursing, Arya Nursing College, Changsari, Assam. Ph. No-7002937528, Email-bhowmiksubhra91[at]gmail.com

Volume 12 Issue 3, March 2023 www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

Paper ID: MR23314205849 DOI: 10.21275/MR23314205849

641